

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITI N	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smz		4/1/00
O.I.P.E. CLASSIFIER		48	45400
FORMALITY REVIEW		10405	5-25-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	2/2/00
2	2/2/00
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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